Case 18-10101-TPA Doc 14 Filed 03/02/18 Entered 03/02/18 11:20:27 Desc Main Document Page 1 of 54

Fill in this information to identify your case:					
Debtor 1	Joseph D Barnha				
	First Name	Middle Name	Last Name		
Debtor 2	Alice L Barnhart				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	18-10101				
(if known)	10 10101				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	128,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	123,185.38
	1c. Copy line 63, Total of all property on Schedule A/B	\$	251,185.38
Par	t 2: Summarize Your Liabilities		
			l iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	196,044.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	16,869.42
	Your total liabilities	\$	212,913.42
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,231.13
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,171.13
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debioi i	Joseph D Barnhart	
Debtor 2	Alice L Barnhart	Case number (if known) 18-1010

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,359.74

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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			Document	Page 3 of 54			
Fill in this inforr	mation to identify you	r case and th	is filing:				
Debtor 1	Joseph D Barnh						
Debtor 2	First Name Alice L Barnhar	Middle •	Name	Last Name			
(Spouse, if filing)	First Name	Middle	Name	Last Name			
United States Ba	nkruptcy Court for the:	WESTERN	DISTRICT OF PEN	NSYLVANIA			
Case number _	18-10101			_		I	☐ Check if this is an amended filing
_	rm 106A/B						
Schedul	e A/B: Pro _l	perty					12/15
I. Do you own or h ☐ No. Go to Par	nave any legal or equital	<u>. </u>		wn or Have an Interest In			
^{1.1} 14978 Տ օւ	uth Norrisville Road	d t	What is the proper	ty? Check all that apply	Do not doduc	et coourad clai	me or exemptions. But
Street address,	if available, or other description	on	Duplex or mu	ulti-unit building n or cooperative	the amount of	educt secured claims or exemptions. Int of any secured claims on <i>Schedu</i> : Who Have Claims Secured by Prop	
Meadville City	PA 16	335-0000 ZIP Code	☐ Manufactured☐ Land☐ Investment p	d or mobile home	Current valuentire prope		Current value of the portion you own? \$128,000.00
			☐ Timeshare ☐ Other	st in the property? Check one	Describe the nature of your ownership (such as fee simple, tenancy by the en		ur ownership interest
Crawford			Debtor 2 only				
County			_	Debtor 2 only of the debtors and another	☐ Check i		nunity property
			Other information y property identificat	you wish to add about this iter tion number:	n, such as loca	al	
			Residence Fair Market Va	lue based on Purchase	Price		
				from Part 1, including any		>	\$128,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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	Joseph D Barnhart Alice L Barnhart		Case number (if known) 1	8-10101
Cars, vans	, trucks, tractors, sport utility	vehicles, motorcycles		
□ No				
Yes				
.1 Make:	Ford	Who has an interest in the property? Check one		d claims or exemptions. Put
Model:	F-150 SuperCab 4WD	☐ Debtor 1 only		cured claims on Schedule D: Claims Secured by Property.
Year:	2011	Debtor 2 only	O	0
Approx	mate mileage: 100,00		Current value of the entire property?	Current value of the portion you own?
Other in	nformation:	☐ At least one of the debtors and another		
		Check if this is community property (see instructions)	\$19,225.00	\$19,225.0
			Do not doduct acquire	d claims or exemptions. Put
2 Make:	Toyota	Who has an interest in the property? Check one	the amount of any sec	cured claims on <i>Schedule D:</i>
Model:	Rav4	Debtor 1 only	Creditors Who Have 0	Claims Secured by Property.
Year:	2010	Debtor 2 only	Current value of the	Current value of the
	mate mileage: 110,00	Debter 1 and Debter 2 only	entire property?	portion you own?
Other in	nformation:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$9,050.00	\$9,050.0
B Make:	Dodge	Who has an interest in the property? Check one		d claims or exemptions. Put
Model:	Avenger R/T	Debtor 1 only		cured claims on Schedule D: Claims Secured by Property.
Year:	2013	Debtor 2 only	Orealions who have t	ланн <i>о оесиней бу 1 торен</i> у.
	mate mileage: 60,00		Current value of the entire property?	Current value of the portion you own?
	nformation:	☐ At least one of the debtors and another	entile property:	portion you own:
		Check if this is community property (see instructions)	\$11,400.00	\$11,400.0
		s and other recreational vehicles, other vehicles, a watercraft, fishing vessels, snowmobiles, motorcycle Who has an interest in the property? Check one	accessories	
	Sportsman 570 ATV	Debtor 1 only	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D. Claims Secured by Property.
Model: Year:	2016	Debtor 7 only	Creditors who have t	Jiaims Secured by Property.
rear.	2010		Current value of the	Current value of the
Other in	nformation:	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
Othern	iomaton.	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$4,640.00	\$4,640.0
		own for all of your entries from Part 2, including ite that number here		\$44,315.00
rt 3: Desci	ibe Your Personal and Househo	ld Items		
		e interest in any of the following items?		Current value of the

Official Form 106A/B Schedule A/B: Property

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claims or exemptions.

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Debtor 1 Debtor 2	Joseph D Ba Alice L Barn		Case number (if known)	18-10101
Exam □ No		urnishings ices, furniture, linens, china, kitchenware		
— 16:	s. Describe	Various Household Goods and Furnis Summary Available Upon Request	hings	\$264.00
□ No	ples: Televisions a including cell	nd radios; audio, video, stereo, and digital equip phones, cameras, media players, games	ment; computers, printers, scanners; music c	ollections; electronic devices
		Electronics		\$45.00
Exam	other collecti	figurines; paintings, prints, or other artwork; boo ons, memorabilia, collectibles	rks, pictures, or other art objects; stamp, coin,	or baseball card collections;
Exam	musical instr	graphic, exercise, and other hobby equipment; t	picycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment		
□ No	mples: Everyday cl	othes, furs, leather coats, designer wear, shoes,	accessories	
		Clothes		\$20.00
■ No □ Yes 13. Non- <i>Exai</i> □ No	mples: Everyday je s. Describe farm animals mples: Dogs, cats,	welry, costume jewelry, engagement rings, wedo	ling rings, heirloom jewelry, watches, gems, g	old, silver
		Pets: 3 Dogs and 1 Cat		\$0.00
■ No	-	d household items you did not already list, ir	cluding any health aids you did not list	
		of all of your entries from Part 3, including ar number here		\$329.00

Official Form 106A/B Schedule A/B: Property

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Debtor 1 Debtor 2	Joseph D Ba Alice L Barn		Ca	ase number (if known)	18-10101
Part 4: D	escribe Your Finance	cial Assets			
Do you o	own or have any le	egal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	nples: Money you h	nave in your wallet, in your ho	ome, in a safe deposit box, and on hand wh	en you file your petition	on
_ 100				Cash	\$2.00
			ounts; certificates of deposit; shares in cred with the same institution, list each.	it unions, brokerage h	nouses, and other similar
_	S		Institution name:		
		17.1. Checking	PNC Bank (2756) **Negative at the time of filing	J**	\$0.00
		or publicly traded stocks investment accounts with bro	okerage firms, money market accounts		
■ No □ Yes	S	Institution or issuer	name:		
	oublicly traded sto venture	ock and interests in incorp	orated and unincorporated businesses,	including an interes	t in an LLC, partnership, and
	s. Give specific info	ormation about them Name of entity:		% of ownership:	
Nego Non- ■ No	otiable instruments negotiable instrum	include personal checks, cas ents are those you cannot tra	tiable and non-negotiable instruments thiers' checks, promissory notes, and mone nsfer to someone by signing or delivering t		
☐ Yes	s. Give specific info	rmation about them Issuer name:			
	ement or pension nples: Interests in I		03(b), thrift savings accounts, or other pen	sion or profit-sharing	plans
■ Yes	s. List each accoun	t separately. Type of account:	Institution name:		
		Pension	Crawford County Care		\$75,080.38
Your		d deposits you have made so	that you may continue service or use from public utilities (electric, gas, water), telecon		nies, or others
■ No	S		Institution name or individual:		
		r a periodic payment of mone	ey to you, either for life or for a number of you	ears)	
■ No	`	. , ,	, , , ,	,	
☐ Yes	s Iss	suer name and description.			
26 U.S		on IRA, in an account in a q 529A(b), and 529(b)(1).	ualified ABLE program, or under a quali	fied state tuition pro	ogram.
■ No					

Official Form 106A/B Schedule A/B: Property page 4

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	Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):						
25.	5. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit						
	■ No □ Yes. Give specific information about them						
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements						
	■ No		u licensing agreement	5			
	☐ Yes. Give specific information abou	t them					
27.	Licenses, franchises, and other gen Examples: Building permits, exclusive		holdings, liquor license	es, professional licenses			
	■ No□ Yes. Give specific information about	t them					
M	oney or property owed to you?				Current value of the		
					portion you own? Do not deduct secured claims or exemptions.		
28.	Tax refunds owed to you ☐ No						
	■ Yes. Give specific information about	them, including whether you alread	dy filed the returns and	d the tax years			
		2018 Tax Refund		Federal	\$3,459.00		
			<u>`</u>				
29.	Family support Examples: Past due or lump sum alim	nony, spousal support, child suppor	t, maintenance, divorc	e settlement, property settl	ement		
	■ No □ Yes. Give specific information						
	Tres. Give specific information						
30.	Other amounts someone owes you Examples: Unpaid wages, disability in		its, sick pay, vacation	pay, workers' compensation	on, Social Security		
	benefits; unpaid loans you No	i made to someone eise					
	\square Yes. Give specific information						
31.	Interests in insurance policies Examples: Health, disability, or life insurance	surance; health savings account (H	SA); credit, homeowne	er's, or renter's insurance			
	□ No ■ Vac Name the incurrence company	of analy malian and list its value					
	Yes. Name the insurance company Compan		Beneficiary	r:	Surrender or refund value:		
		ife Insurance Policy h Employer			\$0.00		
		r - 7 -					
		ife Insurance Policy			#0.00		
	<u>Throug</u>	h Employer			\$0.00		

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information..

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	tor 1 tor 2	Joseph D Barnhart Alice L Barnhart		Case number (if known)	18-10101
_		against third parties, whether or not you have filed a law les: Accidents, employment disputes, insurance claims, or right		and for payment	
_	_	Describe each claim			
34. (Other c	ontingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to	set off claims
	No				
	l Yes.	Describe each claim			
_		ancial assets you did not already list			
	No				
L	J Yes.	Give specific information			
36.		ne dollar value of all of your entries from Part 4, includin rt 4. Write that number here			\$78,541.38
Part	5: Des	cribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ite in Part 1.	
37. C	o you o	wn or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		cribe Any Farm- and Commercial Fishing-Related Property You but own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. I	Do you	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. 0	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	I Did Not List Above		
_	Examp	have other property of any kind you did not already list? les: Season tickets, country club membership	?		
	INO TYes (Give specific information			
_	1 100. (Sive appeals information			
54.	Add th	ne dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$128,000.00
56.	Part 2	: Total vehicles, line 5	\$44,315.00		<u> </u>
57.	Part 3	: Total personal and household items, line 15	\$329.00		
58.	Part 4	: Total financial assets, line 36	\$78,541.38		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$123,185.38	Copy personal property to	otal \$123,185.38
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$251,185.38

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this information to identify your case:						
Debtor 1	Joseph D Barnha	ırt				
	First Name	Middle Name	Last Name			
Debtor 2	Alice L Barnhart					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		WESTERN DISTRICT (OF PENNSYLVANIA			
Case number	18-10101					
(if known)					Check if this is an amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

٠.	Which set of exemptions are you claiming: One only, even if your spouse is filling with you.								
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	14978 South Norrisville Road Meadville, PA 16335 Crawford	\$128,000.00	\$2,977.00		11 U.S.C. § 522(d)(1)				
	County Residence Fair Market Value based on Purchase Price Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2011 Ford F-150 SuperCab 4WD	\$19,225.00		\$0.00	11 U.S.C. § 522(d)(5)				
	100,000 miles Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	2010 Toyota Rav4 110,000 miles Line from Schedule A/B: 3.2	\$9,050.00		\$0.00	11 U.S.C. § 522(d)(2)				
	Ellie Holli Goricadie Av.B. 412			100% of fair market value, up to any applicable statutory limit					
	2013 Dodge Avenger R/T 60,000 miles	\$11,400.00		\$0.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit					

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Joseph D Barnhart Debtor 1 18-10101 Debtor 2 Alice L Barnhart Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2016 Polaris Sportsman 570 ATV 11 U.S.C. § 522(d)(5) \$0.00 \$4,640.00 Line from Schedule A/B: 4.1 100% of fair market value, up to any applicable statutory limit Various Household Goods and 11 U.S.C. § 522(d)(3) \$264.00 \$264.00 **Furnishings Summary Available Upon Request** 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 6.1 **Electronics** 11 U.S.C. § 522(d)(3) \$45.00 \$45.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Clothes 11 U.S.C. § 522(d)(3) \$20.00 \$20.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Pets: 3 Dogs and 1 Cat 11 U.S.C. § 522(d)(3) \$0.00 \$0.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$2.00 Line from Schedule A/B: 16.1 П 100% of fair market value, up to any applicable statutory limit Checking: PNC Bank (2756) 11 U.S.C. § 522(d)(5) \$0.00 \$0.00 **Negative at the time of filing** Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Pension: Crawford County Care** 11 U.S.C. § 522(d)(12) \$75,080.38 \$75,080.38 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Federal: 2018 Tax Refund 11 U.S.C. § 522(d)(5) \$3,459.00 \$3,459.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit **Term Life Insurance Policy** 11 U.S.C. § 522(d)(7) \$0.00 \$0.00 **Through Employer** Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit **Term Life Insurance Policy** 11 U.S.C. § 522(d)(7) \$0.00 \$0.00 **Through Employer** Line from Schedule A/B: 31.2 100% of fair market value, up to any applicable statutory limit

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Debtor 1 Debtor 2	Joseph D Barnhart Alice L Barnhart	Case number (if known)	18-10101
	you claiming a homestead exemption of more than \$160,375? oject to adjustment on 4/01/19 and every 3 years after that for cases filed on o No	or after the date of adjustment.)	
	Yes. Did you acquire the property covered by the exemption within 1,215 day No	ys before you filed this case?	
	□ Vac		

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Fill	in this information to identify you	ır case:			
Deb	tor 1 Joseph D Barni	hart			
D-1-	First Name	Middle Name Last Name		-	
	tor 2 Alice L Barnhar First Name	Middle Name Last Name		-	
Unit	ed States Bankruptcy Court for the	: WESTERN DISTRICT OF PENNSYLVANIA			
				-	
Cas (if knd	e number <u>18-10101</u>			□ Check	if this is an
`	,			_	ded filing
О.	isial Farms 400D				
	icial Form 106D				
Sc	hedule D: Creditors	Who Have Claims Secured	by Propert	У	12/15
is nee		If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
	any creditors have claims secured by	y your property?			
	☐ No. Check this box and submit t	his form to the court with your other schedules. Yo	ou have nothing else	to report on this form.	
1	Yes. Fill in all of the information	below.			
Part	1: List All Secured Claims				
2. Li:	st all secured claims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Americo Federal Credit Union	Describe the property that secures the claim:	\$30,060.00	\$19,225.00	\$10,835.00
	Creditor's Name	2011 Ford F-150 SuperCab 4WD			
		100,000 miles			
	4101 Main Street	As of the date you file, the claim is: Check all that			
	Erie, PA 16511	apply. ☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
_	o owes the debt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only Debtor 2 only		ured		
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a	Other (including a right to offset) Auto Loan			
•	community debt				
Date	e debt was incurred05/16	Last 4 digits of account number 7588			
	Americo Federal Credit				
2.2	Union	Describe the property that secures the claim:	\$19,453.00	\$9,050.00	\$10,403.00
	Creditor's Name	2010 Toyota Rav4 110,000 miles			
	4101 Main Street	As of the date you file, the claim is: Check all that apply.			
	Erie, PA 16511	☐ Contingent			
	Number, Street, City, State & Zip Code	Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
	Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured		
	Debtor 2 only	car loan)	-		
	Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, mechanic's lien)			
ПΔ	at least one of the debtors and another	☐ Judgment lien from a lawsuit			

☐ Check if this claim relates to a community debt

■ Other (including a right to offset) Auto Loan

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Debtor 1 Joseph D Barnhart		Case number (if know)	18-10101	
First Name Middle N	ame Last Name			
Debtor 2 Alice L Barnhart First Name Middle N	ame Last Name			
Date debt was incurred 05/16	Last 4 digits of account number 62	222		
Americo Federal Credit				
Union	Describe the property that secures the claim:	\$12,413.00	\$11,400.00	\$1,013.00
Creditor's Name	2013 Dodge Avenger R/T 60,000			
	miles			
4101 Main Street	As of the date you file, the claim is: Check all the	at		
Erie, PA 16511	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	oan		
Date debt was incurred05/16	Last 4 digits of account number 62	223		
Northwest Covins as Book	Barrier de la companya de la company	\$0.005.00	* 4.040.00	#4.455.00
2.4 Northwest Savings Bank Creditor's Name	Describe the property that secures the claim: 2016 Polaris Sportsman 570 ATV	\$9,095.00	\$4,640.00	\$4,455.00
	2010 Folaris Sportsilian 370 ATV			
100 Liberty Street	As of the date you file, the claim is: Check all the apply.	at		
Warren, PA 16365	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage)	or accured		
Debtor 2 only	car loan)	or secureu		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a	8	ment Loan		
community debt				
Date debt was incurred 05/16	Last 4 digits of account number 12	214		
2.5 Pennymac Loan Services	Describe the property that secures the claim:	\$125,023.00	\$128,000.00	\$0.00
Creditor's Name	14978 South Norrisville Road			
	Meadville, PA 16335 Crawford			
	County Residence			
	Fair Market Value based on			
Attn: Bankruptcy	Purchase Price			
Po Box 514357	As of the date you file, the claim is: Check all th	at		
Los Angeles, CA 90051	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1	Joseph D Barnh	nart			Case number (if know)	18-10101
	First Name	Middle Name	Last Name	_		
Debtor 2	7 tiloo = Ballilla			_		
	First Name	Middle Name	Last Name			
	c if this claim relates to nunity debt	o a 🔳 C	Other (including a right to offset)	Mortgage		
Date debt	t was incurred01/1	6	Last 4 digits of account num	ber <u>7889</u>		
Add the	dollar value of your e	ntries in Column	A on this page. Write that num	ber here:	\$196,044	.00
	s the last page of your nat number here:	form, add the do	ollar value totals from all pages	•	\$196,044	.00
Part 2:	List Others to Be N	otified for a De	ebt That You Already Listed	l		
trying to than one	collect from you for a	debt you owe to debts that you li	someone else, list the creditor sted in Part 1, list the addition	in Part 1, and t	hen list the collection age	or example, if a collection agency is ency here. Similarly, if you have more tional persons to be notified for any
	ıme, Number, Street, Cit nelan Hallinan Dia			On whi	ch line in Part 1 did you ent	er the creditor? 2.5

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		Documer	it Page 18	o 0f 54		
Fill in this in	formation to identify your	case:				
Debtor 1	Joseph D Barnha	rt				
Dobto: 1	First Name	Middle Name	Last Name			
Debtor 2	Alice L Barnhart					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	WESTERN DISTRICT O	F PENNSYLVANIA			
Case numbe	r 18-10101				_ c	heck if this is an
					a	mended filing
Official F	orm 106E/F					
	e E/F: Creditors W	ho Have Unsecu	rad Claims			12/15
any executory Schedule G: E: Schedule D: C left. Attach the name and case	e and accurate as possible. Us contracts or unexpired leases xecutory Contracts and Unexp reditors Who Have Claims Sec Continuation Page to this page number (if known). st All of Your PRIORITY Un	that could result in a claim. ired Leases (Official Form 10 ured by Property. If more spa e. If you have no information	Also list executory of 16G). Do not include ace is needed, copy	contracts on Schedule A any creditors with partia the Part you need, fill it o	B: Property (Officially secured claims but, number the ent	al Form 106A/B) and on that are listed in tries in the boxes on the
	editors have priority unsecure					
		u ciaiilis agailist you?				
	to Part 2.					
☐ Yes.						
Part 2: Li	st All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cr	editors have nonpriority unsec	ured claims against you?				
□ No. Yo	u have nothing to report in this p	art. Submit this form to the cou	rt with your other sche	edules.		
Yes.						
unsecured	your nonpriority unsecured classifications, list the creditor separately creditor holds a particular claim, li	for each claim. For each clain	n listed, identify what t	ype of claim it is. Do not lis	st claims already inc	luded in Part 1. If more
						Total claim
4.1 Cap	ital One	Last 4 digits	of account number	3783		\$438.00
	riority Creditor's Name			0.00		Ψ+00.00
	ı: Bankruptcy Box 30285	When was th	e debt incurred?	06/16		
	Lake City, UT 84130					
Numb	per Street City State Zlp Code	As of the dat	e you file, the claim	s: Check all that apply		
Who	incurred the debt? Check one.					
□ D	ebtor 1 only	☐ Contingen	t			
D	ebtor 2 only	☐ Unliquidate	ed			
□ D	ebtor 1 and Debtor 2 only	☐ Disputed				
☐ At	t least one of the debtors and and	T(NON	PRIORITY unsecured	d claim:		
	heck if this claim is for a comr		ans			
debt			s arising out of a sepa	ration agreement or divor	ce that you did not	
Is the	e claim subject to offset?	report as prior		-	-	
■ N	0	☐ Debts to p	ension or profit-sharin	g plans, and other similar	debts	
□ Ye	es	■ Other. Spe		purchases for clot and personal exper		
			g. 500: 100; t	porocriai oxpoi		

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	Alice L Barnhart		Case number (if know)	18-10101	
4.2	Credit Collections Services	Last 4 digits of account number	2434		\$100.00
	Nonpriority Creditor's Name Attention: Bankruptcy 725 Canton Street Norwood, MA 02062	When was the debt incurred?	07/16		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	e that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐ Yes	Other. Specify Collection Past insura	for Nationwide Insur ance premiums	ance	
4.3	Credit Management, LP Nonpriority Creditor's Name	Last 4 digits of account number	1261		\$134.00
	Attn: Bankruptcy Po Box 118288	When was the debt incurred?	05/17		
	Carrollton, TX 75011	_			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐ Yes	Other. Specify Collection Past utility	for Windstream bills		
4.4	Diversified Adjustment Services, Inc	Last 4 digits of account number	2484		\$620.00
	Nonpriority Creditor's Name 60 Coon Rapids Boulevard Coon Rapids, MN 55433	When was the debt incurred?	05/17		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing		ebts	
	☐ Yes	Other. Specify Past utility	for National Fuel bills		

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	r 1 Joseph D Barnhart r 2 Alice L Barnhart	Case number (if know) 18-10101	
4.5	Diversified Consultants, Inc.	Last 4 digits of account number 7406	\$443.00
	Nonpriority Creditor's Name PO Box 551268 Jacksonville, FL 32255	When was the debt incurred? 7/10/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Collection for DirecTV LLC Past utility bills	
4.6	Eastern Revenue Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$1,030.00
	998 Old Eagle School Road Wayne, PA 19087	When was the debt incurred?03/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
		Collection for Meadville Area Ambulance Service	
	Yes	Other. Specify Medical services	
4.7	Eastern Revenue Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$730.00
	998 Old Eagle School Road Wayne, PA 19087	When was the debt incurred? 03/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Collection for Meadville Area Ambulance Service Medical services	

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	r 2 Alice L Barnhart		Case number (if know)	18-10101	
4.8	ERC / Enhanced Recovery Corporation	Last 4 digits of account number	3396		\$514.00
7.0	Nonpriority Creditor's Name				4000
	Attn: Bankruptcy 8014 Bayberry Road	When was the debt incurred?	11/16		
	Jacksonville, FL 32256 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	ne or the date yearne, the claim	or oncor an that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
		☐ Student loans	a olalili		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharir	a plane, and other similar d	obte	
	■ No	· · ·		edis	
	☐ Yes	Other. Specify Past utility	for At& T Mobility		
	55	rast utility	Dillo		
4.9	Frances Stonedale Nonpriority Creditor's Name	Last 4 digits of account number	2016		\$2,436.42
	11004 Liberty Street Extension Meadville, PA 16335	When was the debt incurred?	2016		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	J	,	
	■ No	Debts to pension or profit-sharing	ig plans, and other similar d	ebts	
	Yes	Other. Specify Debt owed	for Judgment Recei	ved	
4.1	MRS BPO LLC	Last 4 digits of account number	7598		\$329.00
	Nonpriority Creditor's Name	_			
	1930 Olney Avenue Cherry Hill, NJ 08003	When was the debt incurred?	06/17		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims		, and you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar d	ebts	
	☐ Yes	Other. Specify Collection Past utility	for Penelec bills		

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OneMain Financial	Last 4 digits of account number	7403	\$3,158.0
Nonpriority Creditor's Name Attn: Bankruptcy Department 601 Nw 2nd Street # 300	When was the debt incurred?	05/16	
Evansville, IN 47708 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce t	hat you did not
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar deb	ots
Yes	■ Other. Specify Credit card supplies	I purchases for house	hold
Receivables Performance Management	Last 4 digits of account number	1927	\$443.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1548	When was the debt incurred?	01/17	
Lynnwood, WA 98036 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset? —	Obligations arising out of a separeport as priority claims	· ·	•
No	Debts to pension or profit-sharing	ng plans, and other similar deb	ots
☐ Yes	■ Other. Specify	for DirecTV LLC bills	
Source Recovery	Last 4 digits of account number	4377	\$1,133.0
Nonpriority Creditor's Name Po Box 450 Springfield, PA 19064	When was the debt incurred?	7/01/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	aration agreement or divorce t	hat you did not
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar del	ots
■ No	·	for Suburban Propan	

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	Alice L Barnhart		Case number (if know)	18-10101	
4.1	Sunrise Credit Service	Lord Barrows	2697		\$3,047.00
4	Nonpriority Creditor's Name 260 Airport Plaza	Last 4 digits of account number When was the debt incurred?	11/16		φ3,047.00
	Farmingdale, NY 11735		11/10		-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
	Yes	Other Specify Collection Past utility	for At &T Mobility bills		-
4.1	Verizon	Last 4 digits of account number	0001		\$2,314.00
	Nonpriority Creditor's Name Bankruptcy Dept	When was the debt incurred?	10/14		
	500 Technology Drive	When was the dest mounted.	10/14		-
	Suite 550 Saint Charles, MO 63304				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
	Yes	■ Other Specify Past Utility			
D1-0	List Others to De Notified About a De	Let The d Very Almondral Sets d			-
Part 3	List Others to Be Notified About a De his page only if you have others to be notified	•	you alroady listed in Parts	1 or 2 For ovamr	alo if a collection agency
is try have	ing to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor in at you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the	collection agenc	y here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did you	_		
	· Mobility ox 6416		Part 1: Creditors with Prior	,	
_	Stream, IL 60197	•	Part 2: Creditors with Non	oriority Unsecured	Claims
	,	Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did you	_		
	TV LLC Bankruptcies		Part 1: Creditors with Prior	•	
	ox 6550	•	Part 2: Creditors with Non	oriority Unsecured	Claims
Engle	ewood, CO 80155	Last 4 digits of account number			
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?		
First	Energy	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Prior	ity Unsecured Cla	ims
	nue Assurance		Part 2: Creditors with Non	oriority Unsecured	Claims
	Fairmont Avenue				

Official Form 106 E/F

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Debtor 1 Joseph D Barnhart Debtor 2 Alice L Barnhart		Case number (if know)
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	· _
Meadville Area Ambulance 872 Water Street	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Meadville, PA 16335		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	· <u> </u>
National Fuel 1100 State Street	Line 4.4 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Erie, PA 16501		Part 2: Creditors with Nonpriority Unsecured Claims
Enc, 1 A 10001	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	, ,
Nationwide Insurance	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1 West Nationwide Boulevard Columbus, OH 43215		■ Part 2: Creditors with Nonpriority Unsecured Claims
Olumbus, 011 432 13	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Suburban Propane	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
11341 Mercer Pike Meadville, PA 16335		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Windstream Communications	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Alice Peace 2 North Main Street		Part 2: Creditors with Nonpriority Unsecured Claims
Greenville, SC 29601		
•	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 16,869.42
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 16,869.42

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Fill in this inform				
Debtor 1	Joseph D Barnha	rt		
	First Name	Middle Name	Last Name	
Debtor 2	Alice L Barnhart			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT	OF PENNSYLVANIA	
Case number	18-10101			
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1		· · · · · · · · · · · · · · · · · · ·	•		
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2	NI.				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Docume	nı Page 23 C	11 54	
Fill in this	information to identify your	case:			
Debtor 1	Joseph D Barnha	r4			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2	Alice L Barnhart				
(Spouse if, filing		Middle Name	Last Name		
United State	es Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case numb	per 18-10101				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ohtore			40/45
Scried	ule n. Toul Cou	enroi 2			12/15
Arizona ■ No. (□ Yes. 3. In Coluin line	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spourmn 1, list all of your codebt 2 again as a codebtor only in	Nevada, New Mexico, Puuse, or legal equivalent live	e with you at the time? spouse as a codebtor tor or cosigner. Make	ington, and Wisconsin.) if your spouse is filing sure you have listed the	y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	olumn 2.	101111 1002/1), 01 001100	ale o (omelai i omi i	ooj. Ose ochedale b,	ochedule Eri, or ochedule o to m
_	Column 1: Your codebtor lame, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
0.4				Пол. т. в. г.	,
3.1	Name			_ ☐ Schedule D, line	
·	tanio			☐ Schedule E/F, li	
				☐ Schedule G, line	e
	Number Street	_		_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	2
	Name			Schedule E/F, li	
				☐ Schedule G, line	
_				_ = ===================================	-
	Number Street City	State	ZIP Code		
	July	State	Zii- Coue		

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	in this information	Joseph D B									
	otor 2 ouse, if filing)	Alice L Barn	ınart				_				
Uni	ted States Bankrup	otcy Court for the	: WESTERN DISTRICT	OF PE	NNSYLVANI	Ą					
1		-10101		_				Check if this is	s:		
(If kr	nown)							☐ An amend	_		h t
										ving postpetition c e following date:	napter
0	fficial Form	<u> 1061</u>						MM / DD/	YYYY		
S	chedule I:	Your Inc	ome								12/15
Pa r 1.	Fill in your emp	e Employment		Debto	or 1			Dehtor	2 or non	-filing spouse	
	information.	than and ich			nployed			■ Emp		-ming spouse	
	If you have more attach a separate information abou	e page with	Employment status	☐ Not employed			`	employed	i		
	employers.		Occupation	Labo	rer			Nurse	's Aid		
	Include part-time self-employed wo		Employer's name	Delta Inc	Railroad C	Constru	ctio	n Crawf	ord Cou	inty Commissio	oners
	Occupation may or homemaker, if		Employer's address	_	ox 1398 abula, OH 4	14005			State H	ighway 198 PA 16433	
			How long employed t	here?	4 Monti	hs			11 Year	s	
Par	t 2: Give De	etails About Mor	nthly Income								
	mate monthly incuse unless you are		ate you file this form. If	you have	e nothing to re	eport for	any I	ine, write \$0 in th	e space.	Include your non-	filing
If yo		spouse have mo	ore than one employer, co	ombine th	ne information	n for all e	emplo	oyers for that pers	on on the	e lines below. If yo	u need
								For Debtor 1		Debtor 2 or filing spouse	
2.			ry, and commissions (b			2.	\$	3,754.48	\$	3,317.33	
3.	Estimate and lis	st monthly overt	ime pay.			3.	+\$	0.00	+\$	0.00	

Official Form 106I Schedule I: Your Income page 1

3,754.48

3,317.33

Calculate gross Income. Add line 2 + line 3.

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	otor 1 otor 2	Joseph D Barnhart Alice L Barnhart	_	(Case	number (if known)	18-10)101		
						Debtor 1	non	Debtor -filing s	pouse	
	Cop	y line 4 here	4.		\$_	3,754.48	\$	3,	317.33	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	1,220.59	\$		581.96	i
	5b.	Mandatory contributions for retirement plans	5b).	\$_	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50		\$_	0.00	\$		0.00	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$ \$	0.00	\$		271.29	_
	5ı. 5g.	Union dues	5i.		\$ _	0.00	* *		0.00 55.09	_
	5h.	Other deductions. Specify:	-). 1.+	\$ -	0.00	· · —		0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		* \$	1,220.59	· •		908.34	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* – \$	2,533.89	\$		408.99	_
		• • • • • • • • • • • • • • • • • • • •	• •		–	2,333.03	Ψ		700.33	_
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	1 .	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b).	\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.00	\$		0.00	_
	8d.	Unemployment compensation	80		\$-	0.00	\$-		0.00	_
	8e.	Social Security	86	.	\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	9 8f.		\$	0.00	\$		0.00	_
	8g.	Pension or retirement income	_ 8g		\$-	0.00	\$_		0.00	_
	8h.	Other monthly income. Specify: Prorated Tax Refund		, 1.+	\$	288.25			0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	288.25	\$_		0.0	_
			Γ							
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,822.14 + \$_	2,4	08.99	= \$ _	5,231.13
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•			e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	5,231.13
13	Do	you expect an increase or decrease within the year after you file this form	?						Combi month	ned ly income
		No. Yes. Explain:	-							

	a this is famous	Control descriptions				Ī		
	n this informa	ition to identify yo	our case:					
Deb	tor 1	Joseph D Ba	arnhart				ck if this is:	
Deb	tor 2	Alice L Barn	hart				An amended filing	wing postpetition chapter
	ouse, if filing)	Alice L Balli	IIait					the following date:
Linit	nd States Banks	runtov Court for the	· WESTE	ERN DISTRICT OF PENNS	SVI VANIA		MM / DD / YYYY	
Office	eu States Bariki	upicy Court for the	. WESTE	LKN DISTRICT OF FENING	31 LVAINIA		WIWI/DD/TTTT	
	e number 18	3-10101						
Of	ficial Fo	rm 106J						
		J: Your	Eyner	1808				12/15
				ISCS If two married people ar	e filing together, b	oth are equ	ally responsible fo	
info	rmation. If m		eded, atta	ch another sheet to this				
Part		ribe Your House						
1.	Is this a joir		inoiu					
	☐ No. Go to	line 2.						
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N	0						
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	Пис	. ,	•			
۷.	•	•	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
								□ No
	Do not state dependents				Son		14 Years	■ Yes
								□ No
								□Yes
								□ No
								☐ Yes
							_	□ No
								☐ Yes
3.		penses include f people other t	han	No				
		d your depende		Yes				
Down								
		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this f	orm as a si	innlement in a Cha	anter 13 case to report
exp	enses as of a			y is filed. If this is a supp				
арр	licable date.							
Incl	ude expense	s paid for with	non-cash	government assistance i	f you know			
			d have inc	cluded it on Schedule I: \	our Income		Your exp	ansas
(On	icial Form 10	юі.)					Tour exp	CH3C3
4.	The rental of	or home owners	hip expen	ses for your residence.	nclude first mortgag	e		
		nd any rent for th			0 0	4. \$		0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	\$	0.00
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b. 9	\$	0.00
				upkeep expenses		4c. S		90.13
_		owner's associat			and the state of t	4d. 9	·	0.00
5.	Additional r	nortgage payme	ents for vo	our residence, such as ho	me equity loans	5. 9	h	0.00

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	tor 1 tor 2		D Barnhart Barnhart	Case nun	nber (if known)	18-10101
6.	Utilit	ies:				
	6a.	Electricity	v, heat, natural gas	6a.	\$	280.00
	6b.	Water, se	ewer, garbage collection	6b.	\$	45.00
	6c.	Telephon	e, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
	6d.	Other. Sp	pecify: Coal	6d.	\$	335.00
7.	Food	and hous	sekeeping supplies	7.	\$	735.00
8.	Child	dcare and	children's education costs	8.	\$	50.00
9.	Cloth	hing, laund	dry, and dry cleaning	9.	\$	120.00
10.	Pers	onal care	products and services	10.	\$	90.00
11.	Medi	ical and de	ental expenses	11.	\$	356.00
12.			i. Include gas, maintenance, bus or train fare. car payments.	12.	\$	400.00
13.	Ente	rtainment	clubs, recreation, newspapers, magazines, and books	13.	\$	110.00
14.	Char	itable con	tributions and religious donations	14.	\$	100.00
15.	Do no	rance. ot include i Life insur	nsurance deducted from your pay or included in lines 4 or 20. ance	15a.	\$	0.00
	15b.	Health in:	surance	15b.	\$	0.00
	15c.	Vehicle ir	nsurance	15c.	\$	150.00
	15d.	Other ins	urance. Specify:	15d.	\$	0.00
	Spec	cify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.			lease payments:	170	¢	0.00
			nents for Vehicle 1	17a.	·	0.00
			nents for Vehicle 2	17b. 17c.	·	0.00
		Other. Sp Other. Sp	·	17d. 17d.	· -	0.00
18			s of alimony, maintenance, and support that you did not report		Φ	0.00
	dedu	icted from	your pay on line 5, Schedule I, Your Income (Official Form 106	I). 18.		0.00
19.			s you make to support others who do not live with you.	40	\$	0.00
20.	Spec		perty expenses not included in lines 4 or 5 of this form or on So	19.		
20.			es on other property	20a.		0.00
		Real esta		20b.	· -	0.00
			homeowner's, or renter's insurance	20c.	·	0.00
			nce, repair, and upkeep expenses	20d.		0.00
			ner's association or condominium dues	20e.	·	0.00
21.		r: Specify:			+\$	35.00
		acco Pro			+\$	25.00
					, ,	20.00
22.			monthly expenses			
			through 21.	•	\$	3,171.13
			22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	
	22c. /	Add line 22	2a and 22b. The result is your monthly expenses.		\$	3,171.13
23.	Calc	ulate your	monthly net income.			J
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	5,231.13
	23b.	Сору уог	r monthly expenses from line 22c above.	23b.	-\$	3,171.13
	23c.		your monthly expenses from your monthly income. It is your <i>monthly net income</i> .	23c.	\$	2,060.00
24.	For ex modifi	xample, do y ication to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect ye terms of your mortgage?			ease or decrease because of a
	■ No		le			
	☐ Ye	es.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Joseph D Barnha	rt			
Debter 1	First Name	Middle Name	Las	st Name	
Debtor 2	Alice L Barnhart				
(Spouse if, filing)	First Name	Middle Name	Las	st Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNS	/LVANIA	
Case number	18-10101				
(if known)					☐ Check if this is an amended filing
Official Forr		ın Individual	Debt	or's Schedules	12/15
Doolara	TOTT ABOUT C	- IIIaiviaaai		or a correction	12/13
You must file thi obtaining money	is form whenever you fi	le bankruptcy schedules	s or amend	supplying correct information. ed schedules. Making a false state e can result in fines up to \$250,00	
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help	you fill out bankruptcy forms?	
■ No					
☐ Yes. I	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
•	alty of perjury, I declare e true and correct.	that I have read the sum	nmary and s	schedules filed with this declaration	on and
X /s/ Jos	seph D Barnhart		х	/s/ Alice L Barnhart	
	h D Barnhart			Alice L Barnhart	
Signatu	re of Debtor 1			Signature of Debtor 2	

Date March 2, 2018

Date March 2, 2018

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HII	in this inform	nation to identify you	r casa:			
	btor 1					
Dei	ו וטוטו	Joseph D Barnh First Name	Middle Name	Last Name		
Del	btor 2	Alice L Barnhar	t			
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ba	nkruptcy Court for the:	WESTERN DISTRICT O	F PENNSYLVANIA		
Ca	se number	18-10101				
(if kr	nown)				_	Check if this is an amended filing
Of	ficial Fo	rm 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/10
info	rmation. If m		, attach a separate sheet to	are filing together, both are this form. On the top of an		
	<u> </u>	,	arital Status and Where Yo	u Lived Before		
1.	What is you	r current marital stat	us?			
	■ Married □ Not ma					
2.	During the I	ast 3 years have you	lived anywhere other than	where you live now?		
۷.	During the i	asi 5 years, nave you	iived allywhere other than	where you live now:		
	□ No					
	Yes. Lis	st all of the places you	lived in the last 3 years. Do r	not include where you live now	' .	
	Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	20387 Ald Meadville	en Street , PA 16335	From-To:	Same as Debtor	I	■ Same as Debtor 1 From-To:
3. stat	es and territor	<i>ie</i> s include Arizona, Ca		gal equivalent in a commun evada, New Mexico, Puerto R Official Form 106H).		
Pai	rt 2 Expla	in the Sources of You	ır Income			
4.	Fill in the tota	al amount of income yo	ou received from all jobs and	ng a business during this ye all businesses, including part- ve together, list it only once ur	time activities.	endar years?
	□ No ■ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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18-10101 Case number (if known) Debtor 2 Alice L Barnhart **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$3,754.48 \$2,544.37 Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a business ☐ Operating a business For last calendar year: \$45.195.95 \$32,928.28 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$35,465.00 \$32,816.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions and exclusions) (before deductions and exclusions) For the calendar year before that: \$9,000.00 **Personal Injury** (January 1 to December 31, 2016) Lawsuit Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not Yes include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment** Amount you Was this payment for ... **Total amount** paid still owe

Debtor 1

Joseph D Barnhart

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Deb	tor 2 Alice L Barnhart Alice L Barnhart		Case number (if known		18-10101	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for
	OneMain Financial Attn: Bankruptcy Department 601 Nw 2nd Street # 300 Evansville, IN 47708	October 2017 November 2017 December 2017	\$315.00	\$3,158.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplier ☐ Other	ard
	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner r more of their votin	erships of which y g securities; and a	ou are a gener any managing a	al partner; corporation agent, including one fo
	■ No □ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
	Within 1 year before you filed for bankruptinsider? Include payments on debts guaranteed or co		ments or transfer a	any property on a	account of a d	ebt that benefited ar
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
	model o Name and Address	bates of payment	paid	still owe		ditor's name
	4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number	tcy, were you a party in an		on suits, paternity		rt or custody
	Within 1 year before you filed for bankrup. Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			foreclosed, garni		d, seized, or levied? Value of the property
	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details. Creditor Name and Address	ptcy, did any creditor, inc	luding a bank or fii		n, set off any	amounts from your
	Within 1 year before you filed for bankrup			take	n	

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	otor 1 otor 2	Joseph D Barnhart Alice L Barnhart		c	ase number (if known)	18-10101					
Pa	t 5:	List Certain Gifts and Contribution	ns								
13.	I N	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total valu	ue of more than \$60	0 per person?					
	Gifts	with a total value of more than \$60 person	00	Describe the gifts	Dates the gi	you gave fts	Value				
	Perso Addr	on to Whom You Gave the Gift and ess:	İ								
14.		Nithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity No									
		es. Fill in the details for each gift or d			_						
	more Chari	or contributions to charities that in the standard standa		Describe what you contributed	Dates	you ibuted	Value				
Pa	t 6:	List Certain Losses									
15.		n 1 year before you filed for bankru mbling?	ıptcy o	r since you filed for bankruptcy, did y	ou lose anything be	cause of thef	t, fire, other disaster,				
	_	No 'es. Fill in the details.									
		ribe the property you lost and the loss occurred		ribe any insurance coverage for the lo	loss	of your	Value of property lost				
				le the amount that insurance has paid. Li ance claims on line 33 of <i>Schedule A/B: I</i>							
Pa	t 7:	List Certain Payments or Transfer	s								
16.	consu	ulted about seeking bankruptcy or	prepar	did you or anyone else acting on your ing a bankruptcy petition? ers, or credit counseling agencies for serv			ty to anyone you				
		No									
	Y	es. Fill in the details.									
	Addr			Description and value of any prope transferred	or tra	payment nsfer was	Amount of payment				
		il or website address on Who Made the Payment, if Not \	You		made						
		er Law Offices		Expenses - \$500.00		ary 15,	\$1,000.00				
	_	3ox 966		Legal Fee Retainer - \$500.00	2018						
		dville, PA 16335 @mrdebtbuster.com			Janu 2018	ary 26,					
17.	promi		ditors	did you or anyone else acting on your or to make payments to your creditors sted on line 16.		er any prope	rty to anyone who				
	_										
	_	10									
		es. Fill in the details.									
	Perso Addr	on Who Was Paid ess		Description and value of any prope transferred		payment nsfer was	Amount of payment				

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Debtor 1 Joseph D Barnhart 18-10101 Debtor 2 Alice L Barnhart Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Nο Yes. Fill in the details. Last 4 digits of Last balance Name of Financial Institution and Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Who else has or had access Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name
Address (Number, Street, City, State and ZIP Code)

Where is the property?

(Number, Street, City, State and ZIP Code)

Unumber, Street, City, State and ZIP Code)

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Joseph D Barnhart Debtor 2 Alice L Barnhart

Case number (if known) 18-10101

		c substances, wastes, or material into t ulations controlling the cleanup of thes		dwate	er, or other medium, including s	tatutes or						
		means any location, facility, or propert	•	law, v	whether you now own, operate,	or utilize it or used						
_		wn, operate, or utilize it, including disp										
		<i>ardous material</i> means anything an env ardous material, pollutant, contaminant		s was	te, nazardous substance, toxic	substance,						
Rep	ort a	ll notices, releases, and proceedings th	nat you know about, regardless of wher	n they	y occurred.							
24.	Has	any governmental unit notified you that	nt you may be liable or potentially liable	unde	er or in violation of an environm	ental law?						
		No Yes. Fill in the details.										
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice						
25.	Hav	Have you notified any governmental unit of any release of hazardous material?										
		No Yes. Fill in the details.										
	Na	me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice						
26.	Hav	e you been a party in any judicial or adı	·	ironm	nental law? Include settlements	and orders.						
		No										
		Yes. Fill in the details.										
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	Status of the case						
Pai	rt 11:	Give Details About Your Business or	·									
27	Witi	– nin 4 years before you filed for bankrup	toy did you own a business or have an	av of	the following connections to an	v husiness?						
21.	VVIL	,	in a trade, profession, or other activity,	•	•	y business:						
		_										
		□ A member of a limited liability company (LLC) or limited liability partnership (LLP)□ A partner in a partnership										
		☐ An officer, director, or managing ex	secutive of a corporation									
		☐ An owner of at least 5% of the votin	·									
		No. None of the above applies. Go to										
		••	I in the details below for each business	s.								
		siness Name	Describe the nature of the business	J.	Employer Identification number	r						
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security	number or ITIN.						
			·		Dates business existed							
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, did you give a financial statement t	to an	yone about your business? Incl	ude all financial						
		No										
		Yes. Fill in the details below.										
		me dress nber, Street, City, State and ZIP Code)	Date Issued									

Part 12: Sign Below

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Deptor 1 Joseph D Barnhart	_		40 40404
Debtor 2 Alice L Barnhart	C	Case number (if known)	18-10101
are true and correct. I understand that making a false si	atement, concealing property, or	obtaining money or	property by fraud in connection
with a bankruptcy case can result in fines up to \$250,00		•	p p ,
18 U.S.C. §§ 152, 1341, 1519, and 3571.		•	
//	// AP - 1 B - 1 - 1		
/s/ Joseph D Barnhart	/s/ Alice L Barnhart		
Joseph D Barnhart	Alice L Barnhart		
Signature of Debtor 1	Signature of Debtor 2		
Date March 2, 2018	Date March 2, 2018		
Did you attach additional pages to Your Statement of F	inancial Affairs for Individuals Fili	ing for Bankruptcv ((Official Form 107)?
■ No		, , ,	,
□Yes			
Did you pay or agree to pay someone who is not an atto	orney to help you fill out bankrupt	cy forms?	
■ No			
☐ Yes. Name of Person Attach the Bankruptcy Pe	tition Preparer's Notice, Declaration,	, and Signature (Offici	al Form 119).

Fill in this information to identify your case:			
Debtor 1	Joseph D Barnhart		
Debtor 2 (Spouse, if filing)	Alice L Barnhart		
United States B	sankruptcy Court for the: Western District of Pennsylvania		
Case number (if known)	18-10101		

Check as directed in lines 17 and 21:		
According to the calculations required by this Statement:		
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).	
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).	
	3. The commitment period is 3 years.	
	4. The commitment period is 5 years.	

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 3,097.56 4,262.18 payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1 Debtor 2				Case numb	er (<i>if known</i>)	18-10101	I	
				Column A Debtor 1		Column B Debtor 2 o	or	
7. Ir	nterest, dividends, and royalties			\$	0.00	\$	0.00	
	Inemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend the Social Security Act. Instead, list it her		as a benefit und	er				
	For you	\$	0.00					
	For your spouse	\$	0.00					
	Pension or retirement income. Do not income income income. Do not income income income income.		ed that was a	\$	0.00	\$	0.00	
re d	ncome from all other sources not liste to not include any benefits received unde eceived as a victim of a war crime, a crin lomestic terrorism. If necessary, list othe otal below.	er the Social Security Act ne against humanity, or in	or payments ternational or	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pa	ges. if anv.		+ \$	0.00	\$	0.00	
11. C	Calculate your total average monthly in ach column. Then add the total for Column	ncome. Add lines 2 through	gh 10 for	4,262.18	+ \$	3,097.56		7,359.74
е	each column. Then add the total for Colu	nn a to the total for Colur	nn Β. Ψ_		-		Ι Ψ	
12. C	Determine How to Measure You copy your total average monthly incordalculate the marital adjustment. Check	ne from line 11.						7,359.74
	You are not married. Fill in 0 below.							
	You are married and your spouse is	filing with you. Fill in 0 be	elow.					
	You are married and your spouse is	not filing with you.						
	Fill in the amount of the income liste dependents, such as payment of the	spouse's tax liability or the	ne spouse's supp	oort of someor	ne other th	an you or you	ur depender	nts.
	Below, specify the basis for excludin adjustments on a separate page.		ount of income of	devoted to eac	ch purpose	e. If necessary	y, list additio	nal
	If this adjustment does not apply, en	ter o below.	\$					
			+\$					
	Total		\$	0.0	00 co	ppy here=>	-	0.00
14.	Your current monthly income. Subtra	ct line 13 from line 12.					\$	7,359.74
15.	Calculate your current monthly incon	ne for the year. Follow th	nese steps:					
	15a. Copy line 14 here=>						\$	7,359.74
	Multiply line 15a by 12 (the number						x 12	2
	15b. The result is your current monthly	income for the year for th	nis part of the for	m			\$8	3,316.88

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Debt Debt		Alice L Barnhart		Case number (if known)	18-10101
16	. Cal	culate the median family income that applies to	ou. Follow these steps	s:	
	16a	. Fill in the state in which you live.	PA		
	16b	. Fill in the number of people in your household.	3		
	16c	Fill in the median family income for your state and To find a list of applicable median income amounts instructions for this form. This list may also be ava	s, go online using the li		\$
17	. Hov	v do the lines compare?	, ,		
	17a	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N			
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcuyour current monthly income from line 14 a	ulation of Your Dispos		
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	y your total average monthly income from line 1	1.		\$\$7,359.74
19.	con	luct the marital adjustment if it applies. If you are tend that calculating the commitment period under 1 use's income, copy the amount from line 13.	married, your spouse 1 U.S.C. § 1325(b)(4)	is not filing with you, and you allows you to deduct part of yo	our
		. If the marital adjustment does not apply, fill in 0 on	line 19a.		-\$0.00
	19b	. Subtract line 19a from line 18.			\$
20.	Cal	culate your current monthly income for the year.	·		7.050.74
	20a	. Copy line 19b			\$\$
		Multiply by 12 (the number of months in a year).			x 12
	20b	. The result is your current monthly income for the y	ear for this part of the f	orm	\$88,316.88
	20c	. Copy the median family income for your state and	size of household from	line 16c	\$\$
	21.	How do the lines compare?			
		☐ Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered by the cour	t, on the top of page 1 of this f	orm, check box 3, The commitment
		Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	lless otherwise ordered	I by the court, on the top of pa	ge 1 of this form, check box 4, The
Par	t 4:	Sign Below			
	Bys	signing here, under penalty of perjury I declare that	he information on this	statement and in any attachme	ents is true and correct.
)		Joseph D Barnhart		/ Alice L Barnhart	
		seph D Barnhart gnature of Debtor 1		lice L Barnhart gnature of Debtor 2	
	Date	March 2, 2018 MM / DD / YYYY	D	March 2, 2018 MM / DD / YYYY	
	If vo	MM / DD / YYYY ou checked 17a, do NOT fill out or file Form 122C-2.		ואוואו / טט / אץץץ	
	•	ou checked 17b, fill out Form 122C-2 and file it with		that form, copy your current n	nonthly income from line 14 above.

Joseph D Barnhart

Debtor 1

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Fill in this int	formation to identify your again			
Debtor 1	formation to identify your case: Joseph D Barnhart			
Debtor 2 (Spouse, if fili	Alice L Barnhart	_ _		
United States	Bankruptcy Court for the: Western District of Pennsylvania	_		
Case number (if known)	18-10101	□ Check	if this is an amended filir	ıg
Official Form Chapter	122C-2 13 Calculation of Your Disposable	Income		04/1
	s form, you will need your completed copy of <i>Chapter 13 State</i> Period (Official Form 122C-1).	ement of Your Current Monthly I	ncome and Calculation of	;
space is need	ete and accurate as possible. If two married people are filing to led, attach a separate sheet to this form, Include the line num ges, write your name and case number (if known).			
Part 1: C	alculate Your Deductions from Your Income			
the question	al Revenue Service (IRS) issues National and Local Standard ons in lines 6-15. To find the IRS standards, go online using t n may also be available at the bankruptcy clerk's office.			
expenses if	expense amounts set out in lines 6-15 regardless of your actual ef they are higher than the standards. Do not include any operating and do not deduct any amounts that you subtracted from your spou	expenses that you subtracted from	n income in lines 5 and 6 of	
If your expe	enses differ from month to month, enter the average expense.			
Note: Line	numbers 1-4 are not used in this form. These numbers apply to in	formation required by a similar form	m used in chapter 7 cases.	
5. The n	umber of people used in determining your deductions from it	ncome		
plus th	the number of people who could be claimed as exemptions on young number of any additional dependents whom you support. This is umber of people in your household.		3	
National S	You must use the IRS National Standards to a	answer the questions in lines 6-7.		
	, clothing, and other items: Using the number of people you enter ards, fill in the dollar amount for food, clothing, and other items.	ered in line 5 and the IRS National	\$1	,378.00
	of-pocket health care allowance: Using the number of people yould be amount for out-of-pocket health care. The number of people is			

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Joseph D Barnhart Debtor 1 Alice L Barnhart 18-10101 Debtor 2 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 3 7c. Subtotal. Multiply line 7a by line 7b. 147.00 Copy here=> 147.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> 0.00 7g. Total. Add line 7c and line 7f 147.00 Copy total here=> 147.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 569.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 816.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Pennymac Loan Services** 922.00 Repeat this amount Сору 922.00 922.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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Debtor 1 18-10101 Alice L Barnhart Debtor 2 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 500.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 2011 Ford F-150 SuperCab 4WD 100,000 miles 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Americo Federal Credit Union** 557.00 Repeat this Copy amount on **Total Average Monthly Payment** 557.00 557.00 here => line 33b. 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Describe Vehicle 2: 2010 Toyota Rav4 110,000 miles 13d. Ownership or leasing costs using IRS Local Standard..... 485.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment **Americo Federal Credit Union** 360.46 Copy Repeat this here amount on line 33c. Total average monthly payment 360.46 360.46 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 124.54 124.54 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Joseph D Barnhart

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Debtor 1 Debtor 2 Alice L Barnhart Case number (if known) 18-10101

Oth	er Nece	essary Expenses	In addition to the expense d the following IRS categories		s listed above,	you are allowed your monthly expenses	for	
16.	self-en	nployment taxes, soc ay for these taxes. He	ial security taxes, and Medic	are taxes	s. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from ust divide the expected refund by 12 for taxes		
		include real estate,	,	triat is w	itimola to pay	ioi taxoo.	\$	1,802.55
17.	Involu	ntary deductions: T	he total monthly payroll dedu	uctions th	nat your job red	quires, such as retirement		
		outions, union dues, a include amounts tha		o, such a	s voluntary 40	1(k) contributions or payroll savings.	\$	55.09
18.	filing to Do not	ogether, include payn	nents that you make for your r life insurance on your depe	spouse's	s term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.			The total monthly amount the			by the order of a court or		
	administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35						\$	0.00
20.	Educa	tion: The total month	nly amount that you pay for e	ducation	that is either r	equired:		
	as a	a condition for your jo	b, or					
	for	your physically or me	ntally challenged dependent	child if r	no public educa	ation is available for similar services.	\$	0.00
21.			ly amount that you pay for ch r any elementary or seconda		•	itting, daycare, nursery, and preschool.	\$	0.00
22.	that is	required for the healt		depende	ents and that is	amount that you pay for health care s not reimbursed by insurance or paid all entered in line 7.		0.00
	Payme	ents for health insurar	nce or health savings accour	nts shoul	d be listed only	/ in line 25.	\$	0.00
	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. +\$					250.00		
24.		II of the expenses a nes 6 through 23.	lowed under the IRS expe	nse allov	wances.		\$	4,826.18
Add		Expense Deduction	s These are additional do					
25.	insura					ses. The monthly expenses for health ly necessary for yourself, your spouse, c	r	
	Health	insurance		\$	271.29			
	Disabi	lity insurance		\$	0.00			
	Health	savings account	+	· \$	0.00			
	Total			\$	271.29	Copy total here=>	\$	271.29
	D	t U d. d. d	-1-1 · · · · · · · · · · · · · ·					
		actually spend this to No. How much do y						
		Yes		\$				
26.	continu	ue to pay for the reas ousehold or member	onable and necessary care a	and supp o is unat	ort of an elder	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the		
	safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential. \$				0.00			

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28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses or line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8. then fill in the excess amount of home energy costs You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42" per child) that you pay for your dependent children who are younger than 18 years dot to attend a private o public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. * Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. It U.S.C. § 546(4)(3) and (4). Do not include any amount more than 15% of your gross monthly income. 32. Add all of the additional expense		
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110		
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□ No		
Yes +	\$	
33e Total average monthly payment. Add lines 33a through 33d \$ 1,839.46		1,839.46

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Joseph D Barnhart Debtor 1 Alice L Barnhart 18-10101 Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount 14978 South Norrisville Road Meadville, PA 16335 Crawford County Residence Fair Market Value based on Purchase **3.890.00** ÷ 60 = \$ **Pennymac Loan Services** 64.83 **Price** \$ $\div 60 = \$$ \$ $\div 60 = +$ \$ Сору total 64.83 64.83 Total \$ here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 0.00 ÷ 60 \$ 36. Projected monthly Chapter 13 plan payment 1,760.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 4.10 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 72.16 72.16 Average monthly administrative expense here=> \$ 1,976.45 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4,826.18 \$ expense allowances Copy line 32, All of the additional expense deductions \$ 578.71 Copy line 37, All of the deductions for debt payment 1,976.45 7,381.34 7.381.34 Total deductions..... Copy total here=>

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Debtor 1 Debtor 2	Joseph D Barn			_	ase nu	mber (<i>if known</i>)	18-10	101	
Part 2:	Determine Y	our Disposable Income Under 11 U.S.C	. § 1325(k	o)(2)					
		urrent monthly income from line 14 of F or Current Monthly Income and Calculat			d.		\$		7,359.74
ch dis red	ildren. The more sability payments ceived in accord	ably necessary income you receive for a thily average of any child support payment is for a dependent child, reported in Part I cance with applicable nonbankruptcy law to expended for such child.	ts, foster of of Form 12	care payments, or 22C-1, that you		\$	0.00		
en in	nployer withheld 11 U.S.C. § 541	I retirement deductions. The monthly total from wages as contributions for qualified r (b)(7) plus all required repayments of loans c.C. § 362(b)(19).	etirement	: plans, as specifie	ed	\$	0.00		
42. To	tal of all deduc	tions allowed under 11 U.S.C. § 707(b)(2	2)(A). Cop	y line 38 here	=>	\$ 7,3	381.34		
ex the	penses and you eir expenses. Yo	ecial circumstances. If special circumstar have no reasonable alternative, describe to must give your case trustee a detailed ed documentation for the expenses.	the specia	al circumstances a	and				
Descr	ibe the special	circumstances		Amount of exp	pens	е			
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			Total \$	0.00		Copy ere=> \$		0.00	
44. T c	otal adjustment	s. Add lines 40 through 43.		=>	\$_	7,381.34	Co _l	py re=> - \$	7,381.34
45. C a	alculate your m	onthly disposable income under § 1325	(b)(2). Su	btract line 44 from	n line	39.		\$	-21.60
Part 3:	Change in I	ncome or Expenses							
ha tim yo	ve changed or a ne your case will u filed your petit	e or expenses. If the income in Form 1220 are virtually certain to change after the date be open, fill in the information below. For sion, check 122C-1 in the first column, ente fill in when the increase occurred, and fill in	you filed example, r line 2 in	your bankruptcy p if the wages report the second colum	petition rted in n, ex	on and during t ncreased after			
Form	Line	Reason for change		Date of chang	ge	Increase or decrease?	Aı	mount of chan	ge
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	C-2 C-1 C-2 C-1 C-1					☐ Increase☐ Decrease☐ Increase☐ Inc	\$		
1 22	C-2	_		_		☐ Decrease	\$	-	

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Debtor 1 Debtor 2	Joseph D Barnhart Alice L Barnhart	_	Case number (if known)	18-10101
Part 4:	Sign Below			
	By signing here, under penalty of perjury you declare that the inform		,	achments is true and correct.
-	/s/ Joseph D Barnhart Joseph D Barnhart Signature of Debtor 1	Х	Alice L Barnhart Alice L Barnhart Signature of Debtor 2	
Date	March 2, 2018 MM / DD / YYYY	Date	MM / DD / YYYY	

Debtor 1 Joseph D Barnhart
Debtor 2 Alice L Barnhart

Case number (if known)

18-10101

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2017 to 01/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Delta Railroad Construction Inc.

Income by Month:

6 Months Ago:	08/2017	\$0.00
5 Months Ago:	09/2017	\$0.00
4 Months Ago:	10/2017	\$3,754.48
3 Months Ago:	11/2017	\$3,754.48
2 Months Ago:	12/2017	\$3,754.48
Last Month:	01/2018	\$3,754.48
	Average per month:	\$2,502.99

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Prorated Tax Refund** Constant income of **\$288.25** per month.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Suit-Kote Corporation

Income by Month:

6 Months Ago:	08/2017	\$5,142.20
5 Months Ago:	09/2017	\$3,683.44
4 Months Ago:	10/2017	\$0.00
3 Months Ago:	11/2017	\$0.00
2 Months Ago:	12/2017	\$0.00
Last Month:	01/2018	\$0.00
	Average per month:	\$1,470.94

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Debtor 1 Joseph D Barnhart
Debtor 2 Alice L Barnhart

Case number (if known)

18-10101

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 08/01/2017 to 01/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Crawford County Commissioners

Income by Month:

6 Months Ago:	08/2017	\$2,749.47
5 Months Ago:	09/2017	\$2,485.83
4 Months Ago:	10/2017	\$2,767.68
3 Months Ago:	11/2017	\$3,075.61
2 Months Ago:	12/2017	\$4,386.14
Last Month:	01/2018	\$3,120.60
	Average per month:	\$3,097.56

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-10101-TPA Doc 14 Filed 03/02/18 Entered 03/02/18 11:20:27 Desc Main Document Page 53 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In	Joseph D Barnhart re Alice L Barnhart		Case No.	18-10101		
		Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPENS	SATION OF ATTOI	RNEY FOR DE	BTOR(S)		
1.	compensation paid to me within one year before the filing	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that impensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
				4,000.00		
	Prior to the filing of this statement I have received		\$	500.00		
	Balance Due		\$	3,500.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are memb	pers and associates of n	ny law firm.	
	☐ I have agreed to share the above-disclosed compensati copy of the agreement, together with a list of the name				/ firm. A	
5.	In return for the above-disclosed fee, I have agreed to rend	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statence c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Negotiations with secured creditors to recreaffirmation agreements and applications 	nent of affairs and plan which and confirmation hearing, ar duce to market value; exe s as needed; preparation	n may be required; and any adjourned hear emption planning;	ings thereof; preparation and fili	ing of	
	522(f)(2)(A) for avoidance of liens on hous	sehold goods.				
6.	By agreement with the debtor(s), the above-disclosed fee dependence on the debtors in any disclosure any other adversary proceeding.	loes not include the following hargeability actions, judi	g service: cial lien avoidance	es, relief from stay a	actions or	
		CERTIFICATION				
thi	I certify that the foregoing is a complete statement of any as bankruptcy proceeding.	agreement or arrangement for	payment to me for re	presentation of the deb	otor(s) in	
	March 2, 2018	/s/ Daniel P Foste	er			
	Date	Daniel P Foster			_	
		Signature of Attorne Foster Law Office				
		PO Box 966				
		Meadville, PA 163				
		814-724-1165 Fa dan@mrdebtbus				
		Name of law firm			_	

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United States Bankruptcy Court Western District of Pennsylvania

In re	Joseph D Barnhart Alice L Barnhart		Case No.	18-10101	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	March 2, 2018	/s/ Joseph D Barnhart	
		Joseph D Barnhart	
		Signature of Debtor	
Date:	March 2, 2018	/s/ Alice L Barnhart	
		Alice L Barnhart	
		Signature of Debtor	